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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Derrick First name Lance Middle name Clanton Last name and Suffix (Sr., Jr., II, III)	- - -	Dawn First name Marie Middle name Clanton Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.			FKA Dawn Hummel
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1885		xxx-xx-1022

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Debtor 1 Derrick Lance Clanton
Debtor 2 Dawn Marie Clanton

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
Where you live	1003 S. Harrison Street	If Debtor 2 lives at a different address:		
	Batavia, IL 60510 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
	Kane	County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other		
	other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINs Where you live 1003 S. Harrison Street Batavia, IL 60510 Number, Street, City, State & ZIP Code Kane County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.		

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	otor 1 otor 2	Derrick Lance Clar Dawn Marie Clanto			Docum	9	Case number (if known)	
Par	rt 2:	Tell the Court About	Your Ba	nkruptcy Ca	ase			
7.	The	chapter of the cruptcy Code you are	Check	one. (For a b	orief description of	each, see <i>Notice Required by 1</i> age 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for Ban- box.	kruptcy
	choc	osing to file under	■ Ch	apter 7				
				apter 11				
			☐ Ch	apter 12				
			☐ Ch	apter 13				
8.	How	you will pay the fee	_ ;	about how yo	ou may pay. Typic attorney is submi	ally, if you are paying the fee you	with the clerk's office in your local court for mourself, you may pay with cash, cashier's check, lf, your attorney may pay with a credit card or control of the court of the	or money
				need to pay	y the fee in instal	Ilments. If you choose this optio (Official Form 103A).	n, sign and attach the Application for Individual	s to Pay
				I request that but is not requapplies to you	nt my fee be waiv uired to, waive yo ur family size and	red (You may request this option ur fee, and may do so only if you you are unable to pay the fee in	only if you are filing for Chapter 7. By law, a ju ir income is less than 150% of the official pove installments). If you choose this option, you mu al Form 103B) and file it with your petition.	rty line that
9.	Have	Have you filed for bankruptcy within the	■ No.					
		B years?	☐ Yes	5.				
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		any bankruptcy s pending or being	■ No					
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes	.				
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your lence?	□ No.	Go to I	ine 12.			
	16910	16110 6 :	■ Yes	s. Has yo	our landlord obtain	ed an eviction judgment against	you and do you want to stay in your residence	?
					No. Go to line 12	2.		
					Yes. Fill out <i>Initia</i> bankruptcy petiti		udgment Against You (Form 101A) and file it w	ith this

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Debt Debt		Derrick Lance Clar Dawn Marie Clante		Case number (if known)
D	0 .	Daniel Allerd Ave Dec	_•	Van Com an a Cala Barratana
Part	3: I	Report About Any Bu	sinesses	You Own as a Sole Proprietor
12.		ou a sole proprietor y full- or part-time ess?	■ No.	Go to Part 4.
	۸ ا		☐ Yes.	Name and location of business
	busine an inc separ as a c	e proprietorship is a ess you operate as lividual, and is not a ate legal entity such corporation, ership, or LLC.		Name of business, if any
	sole p	have more than one roprietorship, use a ate sheet and attach		Number, Street, City, State & ZIP Code
	it to th	is petition.		Check the appropriate box to describe your business:
				☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
				☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defined in 11 U.S.C. § 101(53A))
				Commodity Broker (as defined in 11 U.S.C. § 101(6))
				□ None of the above
13.	 Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? 		deadlines operation	e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate is. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of its, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure is.C. 1116(1)(B).
		For a definition of small business debtor, see 11 U.S.C. § 101(51D).	■ No.	I am not filing under Chapter 11.
			□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
			☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4 :	Report if You Own or	Have Any	Hazardous Property or Any Property That Needs Immediate Attention
14.		ou own or have any erty that poses or is	No.	
	allege	ed to pose a threat	☐ Yes.	
i F	identi publi	minent and fiable hazard to c health or safety?		What is the hazard?
	prope	you own any erty that needs diate attention?		If immediate attention is needed, why is it needed?
	perish livesto or a b	kample, do you own hable goods, or hock that must be fed, uilding that needs t repairs?		Where is the property? Number, Street, City, State & Zip Code
				inumber, Street, Oity, State α Σιρ Code

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Debtor 1 Derrick Lance Clanton
Debtor 2 Dawn Marie Clanton

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-05869 Doc 1 Filed 02/23/16 Entered 02/23/16 12:42:57 Desc Main Document Page 6 of 60

	tor 1 tor 2	Derrick Lance Cla Dawn Marie Clant		Document		Case number ((if known)
Pari	t 6:	Answer These Questi	ons for R	eporting Purposes			
16.	Wha	t kind of debts do have?	16a.				ed in 11 U.S.C. § 101(8) as "incurred by an
				☐ No. Go to line 16b.			
				Yes. Go to line 17.			
			16b.	Are your debts primarily busine money for a business or investme	ess debts? Businent or through the	ess debts are debts the operation of the busine	at you incurred to obtain ess or investment.
				☐ No. Go to line 16c.			
				☐ Yes. Go to line 17.			
			16c.	State the type of debts you owe th	nat are not consur	mer debts or business	debts
17.		ou filing under oter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.		
	after	ou estimate that any exempt erty is excluded and	■ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be available			ty is excluded and administrative expenses
		administrative expenses are paid that funds will		■ No			
be availab	ailable for oution to unsecured		☐ Yes				
18.		How many Creditors do	1 -49		1 ,000-5,000	1	1 25,001-50,000
	you owe	estimate that you ?	□ 50-99		☐ 5001-10,000		☐ 50,001-100,000
			☐ 100-19 ☐ 200-9		□ 10,001-25,0	100	☐ More than100,000
19.		How much do you	\$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion
		nate your assets to orth?	□ \$50,00	01 - \$100,000	□ \$10,000,001		□ \$1,000,000,001 - \$10 billion
				001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,00	1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
			— \$500,0			******	
20.		much do you nate your liabilities	□ \$0 - \$		\$1,000,001		□ \$500,000,001 - \$1 billion
	to be		_	001 - \$100,000 001 - \$500,000	□ \$10,000,001 □ \$50,000,001		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
				001 - \$500,000 001 - \$1 million		01 - \$500 million	☐ More than \$50 billion
Part	+ 7 ·	Sign Below		<u> </u>			
	you		I have ex	amined this petition, and I declare	under nenalty of r	neriury that the informa	ition provided is true and correct
. 0.	you			,	. , ,	, ,	•
				chosen to file under Chapter 7, I an tates Code. I understand the relief a			nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.
				rney represents me and I did not pa t, I have obtained and read the not			an attorney to help me fill out this
			I request	relief in accordance with the chapte	er of title 11, Unite	ed States Code, specif	ied in this petition.
				cy case can result in fines up to \$25			property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,
			/s/ Derri	ick Lance Clanton		/s/ Dawn Marie Cl	
				Lance Clanton e of Debtor 1		Dawn Marie Clant Signature of Debtor 2	
			Evecutod	on February 23, 2016		Executed on Febru	uary 23, 2016
			LAGUILEU	MM / DD / YYYY			DD / YYYY

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Derrick Lance Clanton Dawn Marie Clanton	 Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Lawren	nce W. Lobb	Date	February 23, 2016	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Lawrence	W. Lobb			
Printed name				
Drendel & Firm name	Jansons Law Group			
111 Flinn	St.			
Batavia, IL	_ 60510			
Number, Street,	City, State & ZIP Code			
Contact phone	630-406-5440	Email address	lwl@batavialaw.com	
6293245				
Bar number & S	tate			

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		Docume	ent Page 8 of 60	
Fill in this infor	mation to identify your	case:		
Debtor 1	Derrick Lance Cla	anton		
	First Name	Middle Name	Last Name	
Debtor 2	Dawn Marie Clan	ton		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	14,557.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	14,557.00
Pa	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	9,696.04
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	7,000.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	147,101.59
	Your total liabilities	\$	163,797.63
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	351.62
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,232.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Debtor 1 Derrick Lance Clanton
Debtor 2 Dawn Marie Clanton

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Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$

1,328.92

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Boot A on Oako dala E/E a mostle fallonia	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	7,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	76,204.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	83,204.00

Cas	se 16-05869 Doc 1	L Filed 02/23/16 Document	Entered 02/23/16	12:42:57	Desc Main
Fill in this inform	ation to identify your case a				
Debtor 1	Derrick Lance Clanton				
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	Dawn Marie Clanton First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the: NORT	HERN DISTRICT OF ILLIN	IOIS		
Case number			-		☐ Check if this is an amended filing
Official For	m 106A/B				
Schedule	A/B: Property	/			12/15
think it fits best. Be information. If more Answer every questi	parately list and describe items. as complete and accurate as po space is needed, attach a separ ion. ach Residence, Building, Land,	ossible. If two married people ate sheet to this form. On the	e are filing together, both are e e top of any additional pages, v	qually responsible fo	r supplying correct
	ach Residence, Building, Land,				
No. Go to Part 2 Yes. Where is	2. the property?		, , ,		
	es. If you lease a vehicle, also	•	Recutory Contracts and Onex	pirea Leases.	
3.1 Make: D	odge	Who has an interest in the	n proporty? Obselves	Do not deduct secure	ed claims or exemptions. Put
-	ourney	Debtor 1 only	e property? Check one		cured claims on Schedule D: Claims Secured by Property.
Approximate Other informa	ation:	■ Debtor 2 only □ Debtor 1 and Debtor 2 o □ At least one of the debtor	•	Current value of the entire property?	Current value of the portion you own?
Good con	dition	Check if this is commu (see instructions)	unity property	\$12,088.0	912,088.00
Examples: Boats ■ No □ Yes 5 Add the dollar	craft, motor homes, ATVs and strailers, motors, personal was value of the portion you ow	tercraft, fishing vessels, sn	owmobiles, motorcycle acces om Part 2, including any er	esories	\$42.000.00
pages you hav	e attached for Part 2. Write	that number here		>	\$12,088.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

D	ebtor 1	Case 16-0			Filed 02/23/16 Document	Entere Page 13	ed 02/23/16 12:4 L of 60	l2:57	Desc Main	
	ebtor 2	Dawn Marie					Case number	(if known)		
6.	Example No	old goods and folges: Major applian			hina, kitchenware					
_				urniture n: 1003 S.	Harrison Street, Bat	avia, IL 60	510]	\$	300.00
				ppliances n: 1003 S.	Harrison Street, Bat	avia, IL 60	510]	\$	200.00
_				ousehold n: 1003 S.	Goods Harrison Street, Bat	avia, IL 60	510]		\$50.00
7.	, □ No	es: Televisions a			, stereo, and digital equi dia players, games	oment; comp	uters, printers, scanners	s; music co	ollections; electronic de	evices
				/ideo: TVs n: 1003 S.	Harrison Street, Bat	avia, IL 60	510		\$	200.00
8.	Example ■ No	bles of value es: Antiques and other collection			ints, or other artwork; bo ctibles	oks, pictures,	or other art objects; sta	amp, coin,	or baseball card collec	ctions;
9.	Example No	ent for sports ar es: Sports, photo musical instru Describe	graphic, ex		other hobby equipment;	bicycles, poc	l tables, golf clubs, skis	; canoes a	and kayaks; carpentry t	tools;
10	■ No		s, shotguns	s, ammunitio	n, and related equipmen	t				
11	□ No		othes, furs,	leather coa	ts, designer wear, shoes	, accessories				
_				earing Ap n: 1003 S.	parel Harrison St., Batavi	a, IL 60510]	\$	150.00
12	□ No		welry, cost	ume jewelry,	, engagement rings, wed	ding rings, he	eirloom jewelry, watches	s, gems, g	old, silver	
			Misc. Jo		Harrison Street Bat	avia II 605	10	1	\$	800.00

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Case 16-0586		Filed 02/23/16 Document	Entered 02/23/16 12:42:57 Page 12 of 60	Desc Main
Debtor 2				Case number (if know	n)
<i>Exal</i> □ No	farm animals mples: Dogs, cats, birds, s. Describe	horses			
			ic pets (2 dogs & cat Harrison Street, Bat		\$0.00
■ No	-		ou did not already list, in	ncluding any health aids you did not list	
	d the dollar value of all o Part 3. Write that numb			ny entries for pages you have attached	\$1,700.00
	Describe Your Financial As				
Do you	own or have any legal o	r equitable inter	est in any of the follow	ring?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No □ Ye	mples: Money you have in supples: Money you have in supples: Money			osit box, and on hand when you file your pe of deposit; shares in credit unions, brokerac	
	institutions. If you		counts with the same ins		e nouses, and other similar
□ No	S		Institution r	name:	
- re	S		Checking	Account	
	17.	1.	Location:	TCF National Bank, 2073 Prairie . Charles, IL 60174	\$94.00
	17.	2.		Account TCF National Bank, 2073 Prairie St es, IL 60174	.,\$375.00
_Exa	ds, mutual funds, or pub mples: Bond funds, invest			ney market accounts	
■ No □ Ye	S	Institution or is	ssuer name:		
	t venture	nd interests in ir	ncorporated and uninc	orporated businesses, including an inter	est in an LLC, partnership, and
	s. Give specific informati	on about them Name of entity:		% of ownership:	
Neg Non ■ No	-negotiable instruments a s. Give specific information	e personal check re those you can on about them	ks, cashiers' checks, proi	egotiable instruments missory notes, and money orders. by signing or delivering them.	
	rement or pension accor mples: Interests in IRA, E		1(k), 403(b), thrift saving	s accounts, or other pension or profit-shari	ng plans

Entered 02/23/16 12:42:57 Case 16-05869 Doc 1 Filed 02/23/16 Desc Main Document Page 13 of 60 **Derrick Lance Clanton** Debtor 1 Debtor 2 **Dawn Marie Clanton** Case number (if known) ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Est. 2015 Income Tax Refund \$300.00 Federal & State 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund

Schedule A/B: Property

Best Case Bankruptcy

value:

		Document	Page 14 of	60	
Debtor 1 Debtor 2	Derrick Lance Clanton Dawn Marie Clanton		-	Case number (if known)	
If you a some of	terest in property that is due you from the beneficiary of a living trust, expone has died.			are currently entitled to rec	eive property because
⊔ Yes.	Give specific information				
Examp ■ No	against third parties, whether or no ples: Accidents, employment disputes,			and for payment	
☐ Yes.	Describe each claim				
34. Other €	contingent and unliquidated claims	of every nature, includir	ng counterclaims o	of the debtor and rights to	set off claims
☐ Yes.	Describe each claim				
35. Any fir ■ No	ancial assets you did not already lis	st			
	Give specific information				
	he dollar value of all of your entries art 4. Write that number here	, ,	, , ,	•	\$769.00
Part 5: De	scribe Any Business-Related Property Yo	ou Own or Have an Interest	In. List any real esta	te in Part 1.	
37. Do you 6	own or have any legal or equitable intere	st in any business-related p	property?		
■ No. Go	to Part 6.				
☐ Yes. 0	Go to line 38.				
	scribe Any Farm- and Commercial Fishin ou own or have an interest in farmland, list i		vn or Have an Interes	et In.	
46. Do yo u	own or have any legal or equitable	interest in any farm- or	commercial fishin	g-related property?	
	Go to Part 7.	·			
☐ Yes	. Go to line 47.				
Part 7:	Describe All Property You Own or Have	e an Interest in That You Di	d Not List Above		
	have other property of any kind youles: Season tickets, country club mem				
■ No	•	•			
☐ Yes.	Give specific information				
54. Add t	he dollar value of all of your entries	from Part 7. Write that r	number here		\$0.00

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Official Form 106A/B Schedule A/B: Property page 5

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Doc 1

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Document Page 15 of 60 **Derrick Lance Clanton** Debtor 1 Debtor 2 **Dawn Marie Clanton** Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$12,088.00 Part 3: Total personal and household items, line 15 57. \$1,700.00 Part 4: Total financial assets, line 36 58. \$769.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

62. **Total personal property.** Add lines 56 through 61... \$14,557.00 Copy personal property total

\$14,557.00

\$14,557.00

Official Form 106A/B Schedule A/B: Property page 6

Part 7: Total other property not listed, line 54

63. Total of all property on Schedule A/B. Add line 55 + line 62

61.

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		IAAAIII	111 1 1111. 1111111111	
Fill in this infor	mation to identify your	case:		
Debtor 1	Derrick Lance Cla	anton		
	First Name	Middle Name	Last Name	
Debtor 2	Dawn Marie Clan	ton		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are	you claiming? Check one only	even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	ne Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
2012 Dodge Journey 50,000 miles Good condition	\$12,088.00		\$2,391.96	735 ILCS 5/12-1001(c)	
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
Misc. Furniture Location: 1003 S. Harrison Street,	\$300.00		\$300.00	735 ILCS 5/12-1001(b)	
Batavia, IL 60510 Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit		
Misc. Appliances Location: 1003 S. Harrison Street,	\$200.00		\$200.00	735 ILCS 5/12-1001(b)	
Batavia, IL 60510 Line from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit		
Misc. Household Goods Location: 1003 S. Harrison Street,	\$50.00		\$50.00	735 ILCS 5/12-1001(b)	
Batavia, IL 60510 Line from Schedule A/B: 6.3			100% of fair market value, up to any applicable statutory limit		
Audio-Video: TVs Location: 1003 S. Harrison Street,	\$200.00		\$200.00	735 ILCS 5/12-1001(b)	
Batavia, IL 60510 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		

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Description Description Page 17 of 60

Dawn Marie Clanton Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Misc. Wearing Apparel 735 ILCS 5/12-1001(a) \$150.00 \$150.00 Location: 1003 S. Harrison St., Batavia, IL 60510 100% of fair market value, up to Line from Schedule A/B: 11.1 any applicable statutory limit Misc. Jewlery 735 ILCS 5/12-1001(b) \$800.00 \$800.00 Location: 1003 S. Harrison Street. Batavia IL 60510 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 12.1 **Checking Account** 735 ILCS 5/12-1001(b) \$94.00 \$94.00 Location: TCF National Bank, 2073 Prairie Street, St. Charles, IL 60174 100% of fair market value, up to Line from Schedule A/B: 17.1 any applicable statutory limit **Checking Account** 735 ILCS 5/12-1001(b) \$375.00 \$375.00 Location: TCF National Bank, 2073 Prairie St., St. Charles, IL 60174 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 17.2 Federal & State: Est. 2015 Income 735 ILCS 5/12-1001(b) \$300.00 \$300.00 Tax Refund Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1

	Case :	16-05869		ered 02/23/16 12: 18 of 60	42:57 Desc N	Main
Fill ir	this information	n to identify you				
Debte		errick Lance (Clanton Middle Name Last Name	9		
Debte (Spous		awn Marie Cla st Name	Middle Name Last Name	e		
Unite	d States Bankrup	tcy Court for the	NORTHERN DISTRICT OF ILLINOIS			
Case (if know	number _{vn)}					k if this is an ded filing
	cial Form 10 nedule D:		Who Have Claims Secu	red by Propert	у	12/15
s need	ded, copy the Addi er (if known).	tional Page, fill it	If two married people are filing together, both arout, number the entries, and attach it to this for			
	iny creditors have					
L	J No. Check this I -	box and submit t	his form to the court with your other schedule	s. You have nothing else t	o report on this form.	
	Yes. Fill in all of	the information	below.			
Part	1: List All Sec	ured Claims				
			more than one secured claim, list the creditor separs a particular claim, list the other creditors in Part 2.		Column B Value of collateral	Column C Unsecured
much as possible, list the claims in alphabeti				Do not deduct the value of collateral.	that supports this claim	portion If any
2.1	Chase Auto Fi	nance	Describe the property that secures the claim:	\$9,696.04	\$12,088.00	\$0.00
	Creditor's Name		2012 Dodge Journey 50,000 miles			
	Attn: National		Good condition			
	Bankruptcy De	•	As of the date you file, the claim is: Check all that	l t		
	P.O. Box 2950 Phoenix, AZ 8	-	apply.			
-			Contingent			
	Number, Street, City, S	state & ZIP Code	Unliquidated			
Who	owes the debt?	heck one	☐ Disputed Nature of lien. Check all that apply.			
_	ebtor 1 only	mook one.	☐ An agreement you made (such as mortgage of	r secured		
	ebtor 2 only		car loan)	1 300urcu		
_	ebtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		
At least one of the debtors and another		,	☐ Judgment lien from a lawsuit			
	neck if this claim re			se Money Security		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$9,696.04

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$9,696.04

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Document Page 19 of 60 Fill in this information to identify your case: Debtor 1 **Derrick Lance Clanton** Middle Name Last Name Debtor 2 **Dawn Marie Clanton** Middle Name Last Name (Spouse if, filing) First Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 **Internal Revenue Service** Last 4 digits of account number \$7.000.00 \$7.000.00 \$0.00 Priority Creditor's Name 31 Hopkins Plaza When was the debt incurred? 08/1/2015 Baltimore, MD 21201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: At least one of the debtors and another ☐ Domestic support obligations ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No Other. Specify ☐ Yes Unpaid Income Tax 2012/2013. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? lacksquare No. You have nothing to report in this part. Submit this form to the court with your other schedules.

List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of

Total claim

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Debtor Debtor	Derrick Lance Clanton Dawn Marie Clanton		Case number (if know)	
4.1	AES/Brazos	Last 4 digits of account number	0001	\$14,461.00
	P.O. Box 61047 Harrisburg, PA 17106 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	Opened 7/01/06 Last Active 9/24/13 is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Student Lo	an	
4.2	Afni, Inc.	Last 4 digits of account number	7632	\$568.00
	Nonpriority Creditor's Name P.O. Box 3097 Bloomington, IL 61702	When was the debt incurred?	3/01/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Collection		
4.3	American Express	Last 4 digits of account number	8493	\$1,998.00
	Nonpriority Creditor's Name P.O. Box 3001 16 General Warren Blvd. Malvern, PA 19355	When was the debt incurred?	Opened 10/01/10 Last Active 1/07/14	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	

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Debtor 2	Derrick Lance Clanton Dawn Marie Clanton		Case number (if know)	
4.4	Arnold Scott Harris, P.C.	Last 4 digits of account number	8812	\$998.80
	Nonpriority Creditor's Name 111 West Jackson Blvd. Suite 600	When was the debt incurred?		
_	Chicago, IL 60604 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	(Tollway Debt)	
	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number	8152	\$967.00
<i>F</i>	Attn: Bankruptcy Dept. P.O. Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 1/01/07 Last Active 5/26/14	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit card	purchases	
	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number	7271	\$959.00
	Attn: Bankruptcy Dept. P.O. Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 10/01/10 Last Active 5/26/14	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	□ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	d claim:		
	☐ Check if this claim is for a community	Otodoot loose		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit card	purchases	

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Debtor 1 Debtor 2	Derrick Lance Clanton Dawn Marie Clanton		Case number (if know)	
4.7	Chase Auto Finance	Last 4 digits of account number	2707	\$17,464.36
 	Nonpriority Creditor's Name Attn: National Bankruptcy Dept P.O. Box 29505 Phoenix, AZ 85038 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim	Opened 5/01/12 Last Active 12/23/14	Vy
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes	report as priority claims Debts to pension or profit-sharing	eration agreement or divorce that you did not	
	Chase Card Services	Last 4 digits of account number	8454	\$7,411.00
ı	Nonpriority Creditor's Name Po Box 15298 Wilmington, DE 19850-5298	When was the debt incurred?	Opened 7/01/11 Last Active 9/28/14	
Ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
 	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	eration agreement or divorce that you did not	
I	☐ Yes	Other Specify Credit card		
	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	5128	\$2,300.00
1	Po Box 15298 Wilmington, DE 19850-5298 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim is	Opened 5/01/12 Last Active 9/28/14	
Ŋ	Who incurred the debt? Check one.	As of the date you me, the claim	э. Опеск ан шасарру	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY upsequires	d claim:	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a Giaiifi:	
•	☐ Check if this claim is for a community debt ls the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
1	Yes	Other. Specify Credit card	purchases	

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Debtoi Debtoi	Derrick Lance Clanton Dawn Marie Clanton		Case number (if know)	
4.1	Comenity Bank	Last 4 digits of account number	4099	\$1,284.00
	Nonpriority Creditor's Name Attention: Bankruptcy Dept. P.O. Box 182686 Columbus, OH 43218	When was the debt incurred?	Opened 10/01/09 Last Active 2/16/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Charge Acc		
4.1	Discover Financial Services, LLC Nonpriority Creditor's Name	Last 4 digits of account number	0449	\$2,689.00
	P.O. Box 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 4/01/11 Last Active 9/28/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Judgment	(Kane Co. Case #15SC3693)	
4.1	Discover Financial Services, LLC Nonpriority Creditor's Name	Last 4 digits of account number	7864	\$671.00
	P.O. Box 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 10/01/02 Last Active 1/14/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit card	purchases	

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Debtor Debtor	Derrick Lance Clanton Dawn Marie Clanton		Case number (if know)	
4.1	Diversified Services Group	Last 4 digits of account number	0116	\$406.00
	Nonpriority Creditor's Name 1824 West Grand Ave. Suite 200	When was the debt incurred?	Opened 4/01/13	
	Chicago, IL 60622 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	 Obligations arising out of a separeport as priority claims 	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
	□Yes	Collection (Medical Ce	(Orig. Creditor: Rush Copley nter)	
4.1	Enterprise Recovery Systems, Inc.	Last 4 digits of account number	5687	\$4,749.52
	Nonpriority Creditor's Name 840 S. Frontage Rd.	When was the debt incurred?		
	Woodridge, IL 60517 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only			
	Debtor 2 only	☐ Contingent		
	_	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed	d alabas	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d Claim:	
	☐ Check if this claim is for a community debt		and a second and the second se	
	Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Collection		
4.1	First Premier Bank		0777	\$594.00
5	Nonpriority Creditor's Name	Last 4 digits of account number		\$394.00
	601 S. Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 4/01/07 Last Active 5/25/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	■ Other Specify Credit card	purchases	

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Debtor Debtor	Derrick Lance Clanton Dawn Marie Clanton		Case number (if know)	
4.1 6	Great Lakes Credit Union	Last 4 digits of account number		\$8,000.00
	Nonpriority Creditor's Name P.O. Box 1289	When was the debt incurred?	08/1/2002	
	Bannockburn, IL 60015 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Student Lo	an	
4.1	Great Lakes Ed. Student Loans, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	8581	\$17,346.00
	P.O. Box 7860 Madison, WI 53707	When was the debt incurred?	Opened 8/16/06 Last Active 11/22/13	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured		
	At least one of the debtors and another	■ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Check if this claim is for a community debt			
	Is the claim subject to offset?			
	■ No			
	Yes	Other. Specify Student Lo		
		Student Lo	an	
4.1 8	Great Lakes Ed. Student Loans, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	8888	\$1,898.00
	P.O. Box 7860 Madison, WI 53707	When was the debt incurred?	Opened 2/01/15 Last Active 2/23/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	Student loans	retion core and or diverse that were did.	
	Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Student Lo	an	

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Debtor	1 Derrick Lance Clanton 2 Dawn Marie Clanton	Document Page 20	Case number (if know)	
DCDIOI	2 Dawii Marie Cianton			
4.1 9	Great Lakes Ed. Student Loans, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	8888	\$1,149.00
	P.O. Box 7860 Madison, WI 53707	When was the debt incurred?	Opened 2/01/15 Last Active 2/23/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured ■ Student loans □ Obligations arising out of a sepa	d claim: Iration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Student Lo	an	
4.2	Healthcare Associates Credit Union	Last 4 digits of account number	0700	\$4,924.00
	Nonpriority Creditor's Name 1151 E Warrenville Rd. Naperville, IL 60563	When was the debt incurred?	Opened 6/01/12 Last Active 6/26/13	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa	d claim:	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin		
	□ Yes	■ Other. Specify Collection	g plants, and out of similar dobto	
4.2	Healthcare Associates Credit Union Nonpriority Creditor's Name	Last 4 digits of account number		\$2,000.00
	1151 E Warrenville Rd. Naperville, IL 60563	When was the debt incurred?	06/3/2012	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharin		
	□Yes	■ Other. Specify Personal Le	oan	

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Debtor Debtor	Derrick Lance Clanton Dawn Marie Clanton		Case number (if know)	
4.2	IC System	Last 4 digits of account number	7001	\$377.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 444 Highway 96 East; P.O Box 64378 St. Paul, MN 55164	When was the debt incurred?	Opened 3/01/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Collection	(Orig. Creditor: AT&T Uverse)	
4.2	Kohl's	Last 4 digits of account number	9288	\$184.15
	Nonpriority Creditor's Name		Opened 12/01/08 Last Active	
	N56 W 17000 Ridgewood Dr. Menomonee Falls, WI 53051	When was the debt incurred?	3/03/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	•	
	Yes	Other. Specify Credit card	purchases	
4.2	Macy's Dept Store National Bank Nonpriority Creditor's Name	Last 4 digits of account number	2820	\$366.00
	Bankruptcy Processing P.O. Box 8218	When was the debt incurred?	Opened 10/01/05 Last Active 5/25/14	
	Mason, OH 45040 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	Other. Specify Credit card	purchases	

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2 Dawn Marie Clanton	Case number (if know)			
Merchants' Credit Guide Co.	Last 4 digits of account number	4226	\$75.00	
Nonpriority Creditor's Name 223 W Jackson Blvd. Suite 400	When was the debt incurred?	Opened 6/01/14		
Chicago, IL 60606 Number Street City State Zlp Code		Charle all that apply		
Who incurred the debt? Check one.	As of the date you file, the claim i	s: Спеск ан тлат арріу		
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
Yes	Other. Specify Collection	Orig. Creditor: Edward Hospital)		
Midland Funding, LLC	Last 4 digits of account number		\$1,241.03	
Nonpriority Creditor's Name 8875 Aero Dr. Suite 200	When was the debt incurred?		· ,	
San Diego, CA 92123 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only				
■ Debtor 1 and Debtor 2 only	☐ Unliquidated			
_	☐ Disputed Type of NONPRIORITY unsecured	I claim:		
At least one of the debtors and another	Student loans	· Oldini.		
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
☐ Yes	■ Other. Specify Collection	· 		
NES of Ohio	Last 4 digits of account number	4321	\$241.80	
Nonpriority Creditor's Name 29125 Solon Road	When was the debt incurred?		Ψ211100	
Solon, OH 44139-3442 Number Street City State Zlp Code	As of the date you file, the claim i	e. Check all that apply		
Who incurred the debt? Check one.	As of the date you me, the claim i	5. Спеск ан тат арргу		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Unilquidated ☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?		ration agreement or divorce that you did not		
_	☐ Debts to pension or profit-sharin	a plane, and other similar debte		
■ No	Debts to pension of profit-sharin	g pians, and other similar debts		

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Northland Group	Debtor 2	Derrick Lance Clanton Dawn Marie Clanton		Case number (if know)	
P.O. Box 129 Number Street City State Zip Code Who Incurred the debt? Check one. Debtor 1 only Unliquidated	8	<u>-</u>	Last 4 digits of account number	6840	\$9,527.37
Thorofare, NJ 08086-0129 Number Street City State 2 Doctor		, ,	When was the debt incurred?		
Number Street City State Zip Code Number or community Debtor 2 only Debtor 1 and 2 Debtor 2 only Debtor 1 and 2 Debtor 2 only Debtor 1 and 2 Debtor 3 only Debtor 3 only Debtor 4 and 2 Debtor 3 only Debtor 4 and 5 Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor			when was the dept incurred?		
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 least one of the debtors and another Check if this claim is for a community debt Student boars S	=	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Debtor 2 only		_			
Debtor 1 and Debtor 2 only Disputed		_	☐ Contingent		
At least one of the debtors and another Check if this claim is for a community debt State claim subject to offset? Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check one.		☐ Debtor 2 only	☐ Unliquidated		
Check if this claim is for a community debt Check in the claim subject to offset? Collection		■ Debtor 1 and Debtor 2 only	☐ Disputed		
Cites the claim subject to offset? Contingent Conti		\square At least one of the debtors and another	<u></u>	d claim:	
Is the claim subject to offset? No			Student loans		
Portfolio Recovery Associates, Inc. Nonpriority Creditor's Name 287 Independence Virginia Beach, VA 23462 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 sho loss Sunrise Credit Services, Inc. Nonpriority Creditor's Name Obtended Services, Inc. Nonpriority Creditor's Name Obtended Services, Inc. Nonpriority Creditor's Name No Debtor 1 and Debtor 2 only Debtor 1 sho loss Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 least one of the debtors and another Debtor 4 least one of the debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debto				ration agreement or divorce that you did not	
Portfolio Recovery Associates, Inc. Nonpriority Creditor's Name 287 Independence Virginia Beach, VA 23462 Number Sirect City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 2 only No Debtor 3 ond Debtor 2 only No Debtor 3 ond Debtor 2 only No Debtor 4 ond Debtor 2 only No Debtor 5 only No Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 1 only Debtor 2 only No Debtor 1 only Debtor 2 only No Debtor 1 only Debtor 2 only No Debtor 1 only Debtor 2 only No Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 9 only		■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Nonpriority Creditor's Name 287 Independence Virginia Beach, VA 23462 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 8 only Debtor 9 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debto		Yes	Other. Specify Collection		
Nonpriority Creditor's Name 287 Independence Virginia Beach, VA 23462 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated Disputed Type of Nonpriority Creditor's Name P.O. Box 9100 Parmingdale, NY 11735-854 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated Disputed Type of Nonpriority Creditor's Name Other. Specify Citibank N.A.) Other. Specify Citibank N.A.) 4.3		Portfolio Recovery Associates, Inc.	Last 4 digits of account number	1447	\$808.00
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only		Nonpriority Creditor's Name	-	Opened 1/01/15	·
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Factoring Company (Orig. Creditor: Citibank N.A.) Sunrise Credit Services, Inc. Nonpriority Creditor's Name P.O. Box 9100 Farmingdale, NY 11735-8534 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Student loans Contingent Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Student loans Contingent Debtor 1 and Debtor 2 only Debtor 3 and other similar debts Check if this claim is for a community debt Student loans Contingent Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and 2 betor 4 and 2 betor 4 betor 3 and 3 another Check if this claim is for a community debt Student loans Contingent Debtor 3 and 2 betor 4 betor 4 betor 5 and 3 another Check if this claim is for a community debt Student loans Contingent Debtor 4 and 2 betor 5 and 3 another Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this c					
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Student loans Doligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts Debts or pension or profit-sharing plans, and other similar debts Citibank N.A.) Sunrise Credit Services, Inc. Nonpriority Creditor's Name P.O. Box 9100 Farmingdale, NY 11735-8534 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Student loans Other. Specify Student loans Services, Inc. Last 4 digits of account number Oute. Services, Inc. Last 4 digits of account number Oute. Services, Inc. Last 4 digits of account number Oute. Services, Inc. As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 5 pension or profit-sharing plans, and other similar debts					
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ No □ Debtor 1 as priority Creditor's Name P.O. Box 9100 Farmingdale, NY 11735-8534 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 3 only Contingent □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 2 only □ Debtor 3 only □ Debtor 4 and Debtor 2 only □ Debtor 5 only □ Debtor 5 only □ Debtor 6 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 2 only □ Debtor 3 only □ Debtor 4 and Debtor 2 only □ Debtor 5 only □ Debtor 6 only □ Debtor 7 only □ Debtor 8 only □ Debtor 9 only □ Disputed □ Check if this claim is for a community debt Is the claim subject to offset? □ Debtor 1 only Debtor 2 only □ Debtor 3 only □ Debtor 4 only □ Debtor 5 only □ Debtor 5 only □ Debtor 6 only □ Debtor 6 only □ Debtor 7 only □ Debtor 8 only □ Debtor 9 only □ D		_	По :: .		
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Sumrise Credit Services, Inc. Nopriority Creditor's Name P.O. Box 9100 Farmingdale, NY 11735-8534 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Sumrise Credit Services, Inc. Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Story Other. Specify Disputed Story Student loans Debtor 1 and Debtor 2 only Disputed Disputed Story Debtor 2 only Disputed Disputed Student loans Debtor 3 a separation agreement or divorce that you did not report as priority claims Debtor 3 only of a separation agreement or divorce that you did not report as priority claims Debtor 4 only of None Debtor 4 only only of a separation agreement or divorce that you did not report as priority claims Debtor 4 only only only only only only only only		_	_		
At least one of the debtors and another Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Citibank N.A.) 3		_	`		
Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim subject to offset? Citibank n.A.)		_	·	d claim:	
Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts			<u></u> '	a oldiiii.	
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Teactoring Company (Orig. Creditor: Citibank N.A.) Sunrise Credit Services, Inc. Nonpriority Creditor's Name P.O. Box 9100 Farmingdale, NY 11735-8534 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Sunrise Credit Services, Inc. Last 4 digits of account number When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply Very of Nonpriority Unsecured claim: Type of Nonpriority Unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising plans, and other similar debts			_	uration agreement or divorce that you did not	
Sunrise Credit Services, Inc. Sunrise Credit Services, Inc. Last 4 digits of account number 0016 \$67.56		Is the claim subject to offset?		nation agreement of avoice that you did not	
4.3 Sunrise Credit Services, Inc. Nonpriority Creditor's Name P.O. Box 9100 Farmingdale, NY 11735-8534 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Other. Specify Citibank N.A.) Last 4 digits of account number 0016 \$67.56 When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Sunrise Credit Services, Inc. Last 4 digits of account number When was the debt incurred?		Yes	Other. Specify Factoring C Citibank N	Company (Orig. Creditor: .A.)	
Nonpriority Creditor's Name P.O. Box 9100 Farmingdale, NY 11735-8534 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply Tontingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		Sunrise Credit Services, Inc.	Last 4 digits of account number	0016	\$67.56
Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another At least one of the debtors and another Check if this claim is for a community debt B the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts		Nonpriority Creditor's Name	-		·
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Disputed Disputed Type of NONPRIORITY unsecured claim: Disputed Disputed Disputed Debts to pension or profit-sharing plans, and other similar debts					
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts			As of the date you file, the claim	s: Check all that apply	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		_			
■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts					
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		_	•		
□ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		_	-	d claim:	
debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts		_			
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts		•	_	uration agreement or divorce that you did not	
				nation agreement of divorce that you did not	
☐ Yes ☐ Other. Specify Collection		■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
		☐ Yes	■ Other. Specify Collection		

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otor 2 Dawn Marie Clanton		Case number (if know)	
U.S. Dept Of Education	Last 4 digits of account number	4116	\$8,910.00
Nonpriority Creditor's Name P.O. Box 4222	When was the debt incurred?	Opened 9/01/11	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecure ■ Student loans	d claim:	
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		
	Student Lo	an	
U.S. Dept Of Education Nonpriority Creditor's Name	Last 4 digits of account number	4122	\$8,121.00
P.O. Box 4222 lowa City, IA 52244	When was the debt incurred?	Opened 9/01/10	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	Contingent		
☐ Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d alatas	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	 Student loans Obligations arising out of a separeport as priority claims 	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	Student Lo	an	
U.S. Dept Of Education	Last 4 digits of account number	0681	\$6,969.00
Nonpriority Creditor's Name P.O. Box 4222 lowa City, IA 52244	When was the debt incurred?	Opened 9/01/09	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Student Lo		

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Debtor 1 Debtor 2	Derrick Lance Clanton Dawn Marie Clanton		Case number (if know)	
7	U.S. Dept Of Education	Last 4 digits of account number	5362	\$5,955.00
- 1	Nonpriority Creditor's Name P.O. Box 4222 Iowa City, IA 52244	When was the debt incurred?	Opened 9/01/11	
Ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
1	■ Debtor 1 only	☐ Contingent		
1	Debtor 2 only	☐ Unliquidated		
1	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
I	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
1	☐ Yes	☐ Other. Specify		
		Student Lo	an	
9	U.S. Dept Of Education	Last 4 digits of account number	9125	\$3,983.00
I	Nonpriority Creditor's Name P.O. Box 4222 Iowa City, IA 52244	When was the debt incurred?	Opened 9/01/09	
ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only □ Contingent			
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
I	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
1	☐ Yes	Other. Specify		
		Student Lo	an	
	U.S. Dept Of Education	Last 4 digits of account number	5359	\$3,886.00
I	Nonpriority Creditor's Name P.O. Box 4222 Iowa City, IA 52244	When was the debt incurred?	Opened 9/01/10	
ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
1	Debtor 1 only	☐ Contingent		
1	Debtor 2 only	☐ Unliquidated		
1	Debtor 1 and Debtor 2 only	☐ Disputed		
ļ	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
I	☐ Yes	Other. Specify		
		Student Lo	an	

Dahtan	Case 16-05869 Doc 1	Filed 02/23/16 Entered Document Page 3.	ed 02/23/16 12:42:57 Desc 2 of 60	Main
Debtor Debtor	Derrick Lance Clanton Dawn Marie Clanton		Case number (if know)	
4.3	110 5 40(5)		5050	40.000.00
7	U.S. Dept Of Education Nonpriority Creditor's Name	Last 4 digits of account number	5353	\$2,220.00
	P.O. Box 4222 lowa City, IA 52244	When was the debt incurred?	Opened 6/01/11	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	☐ At least one of the debtors and another	_	a ciaim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes			
		Student Lo	an	
4.3 8	U.S. Dept Of Education	Last 4 digits of account number	4130	\$1,306.00
	Nonpriority Creditor's Name P.O. Box 4222 lowa City, IA 52244	When was the debt incurred?	Opened 6/01/11	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Student Lo	an	
4.3 9	Unique National Collections	Last 4 digits of account number	1883	\$26.00
	Nonpriority Creditor's Name		Opened 12/01/12 Last Active	
	119 E. Maple St. Jeffersonville, IN 47130	When was the debt incurred?	6/21/13	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
	No.	Debts to pension or profit-sharing	g plans, and other similar debts	

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other Specify Public Library)

Collection (Orig. Creditor: West Chicago

☐ Yes

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Derrick Lance Clanton Debtor 2 Dawn Marie Clanton Case number (if know) have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Blitt and Gaines, P.C. Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 661 Glenn Avenue ■ Part 2: Creditors with Nonpriority Unsecured Claims Wheeling, IL 60090 Last 4 digits of account number 5704 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address C.U. Recovery Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 26263 Forest Blvd. Part 2: Creditors with Nonpriority Unsecured Claims Wyoming, MN 55092 Last 4 digits of account number 8455 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Central Credit Services, LLC Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 1850 Part 2: Creditors with Nonpriority Unsecured Claims Saint Charles, MO 63302 Last 4 digits of account number **77XW** Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Client Services, Inc. Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 3451 Harry Truman Blvd. Part 2: Creditors with Nonpriority Unsecured Claims Saint Charles, MO 63301-4047 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Credit Collection Services** Line 4.30 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Two Wells Avenue ■ Part 2: Creditors with Nonpriority Unsecured Claims Newton Center, MA 02459 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **GC Services Limited Partnerhip** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 6330 Gulfton ■ Part 2: Creditors with Nonpriority Unsecured Claims Houston, TX 77081 Last 4 digits of account number 4702 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Illinois Tollway Authority** Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2700 Ogden Ave Part 2: Creditors with Nonpriority Unsecured Claims **Downers Grove, IL 60515** Last 4 digits of account number 8812 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? LTD Financial Services Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 7322 Southwest Freeway Part 2: Creditors with Nonpriority Unsecured Claims **Suite 1600** Houston, TX 77074 Last 4 digits of account number 2671 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? MRS Associates of New Jersey Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1930 Olney Ave. Part 2: Creditors with Nonpriority Unsecured Claims Cherry Hill, NJ 08003 Last 4 digits of account number 8243 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **NES of Ohio** Line 4.26 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 29125 Solon Road Part 2: Creditors with Nonpriority Unsecured Claims Solon, OH 44139-3442 Last 4 digits of account number M021 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Northland Group, Inc. Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

P.O. Box 390905 Minneapolis, MN 55439

Official Form 106 E/F

Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 2 Dawn Marie Clanton		Case number (if know)	
	Last 4 digits of account number	5314	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Northstar Location Services, LLC	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
4285 Genesee Street Cheeklowaga, NY 14225-1943		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Onceriowaga, NT 14223 1343	Last 4 digits of account number	7864	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
PNC Bank P. O. Box 747066 Pittsburgh, PA 15274	Line 4.27 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Professional Placement Services	Line 4.23 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 612 Milwaukee, WI 53201-0621		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Wilwaukee, WI 33201-0021	Last 4 digits of account number	3141	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Toyota Motor Credit Co.	Line 4.28 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
Toyota Financial Services P.O. Box 8026		Part 2: Creditors with Nonpriority Unsecured Claims	
Cedar Rapids, IA 52408			
	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim		
	6a.	Domestic support obligations	6a.	\$	0.00		
Total							
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	7,000.00		
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00		
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00		
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	7,000.00		
					Total Claim		
	6f.	Student loans	6f.	\$	76,204.00		
Total claims							
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00		
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00		
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	70,897.59		
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	147,101.59		

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		1700.111116	111 FAUE 33 01 00	
Fill in this infor	mation to identify your	case:		
Debtor 1	Derrick Lance Cla	anton		
	First Name	Middle Name	Last Name	
Debtor 2	Dawn Marie Clanton			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 David and Patricia Hummel 230 S Forest Ave. Batavia, IL 60510	Lesee on residential lease signed 06/1/2013 expires 06/1/2016

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			Docume	ent Page 36 d	of 60	
Fill in thi	s information to ide	entify your	case:			
Debtor 1	Dorriok	Lance Cla	nnton			
Deptor 1	First Name	Lance Ci	Middle Name	Last Name		
Debtor 2	Dawn M	larie Clan	ton			
(Spouse if, fi			Middle Name	Last Name		
United St	ates Bankruptcy Co	urt for the:	NORTHERN DISTRIC	Γ OF ILLINOIS		
0	- I					
Case nun	nber					☐ Check if this is an
,						amended filing
						3
Officia	al Form 106	Н				
			-1 4			
Sche	dule Η: Υοι	<u>ır Cod</u>	ebtors			12/15
people ar	e filing together, bo	oth are equ	ally responsible for sup	plying correct informate	tion. If more space is ne	te as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
			. Answer every question			,
1. Do	you have any cod	ebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
=						
■ No						
⊔ Ye	es					
2. Wi	thin the last 8 year	s, have you	ı lived in a community p	roperty state or territor	r y? (Community property	states and territories include
Arizo	na, California, Idaho	, Louisiana	, Nevada, New Mexico, Po	uerto Rico, Texas, Wash	ington, and Wisconsin.)	
=	0					
`	o. Go to line 3.	.				
ш те	es. Dia your spouse,	tormer spot	use, or legal equivalent liv	e with you at the time?		
						with you. List the person shown
						e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 2.	-/i (Official	i i oriii 100L/i), or ochec		ooj. Ose ochedule D, C	chedule L/I , or ochedule o to IIII
	Column 1: Your co Name, Number, Street, C		IP Code		Column 2: The cree Check all schedules	ditor to whom you owe the debt
	ramo, rambon, onder, o	ny, otato ana E	0000		Crieck all Scriedules	s τται αρριγ.
3.1					☐ Schedule D, line	
	Name				□ Schedule E/F, lii	
					☐ Schedule G, line	
	Number Circ	-4			<u> </u>	
	Number Stree City	Эĭ	State	ZIP Code		
3.2					☐ Schedule D, line	
0.2	Name				Schedule E/F, line	
					☐ Schedule G, line	
					— Conedule G, IIIIe	· <u> </u>
	Number Stree	et	Stato	ZID Codo		
	City		State	ZIP Code		

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Fill	in this information to identify	your case:					
Del	otor 1 Derric	k Lance Clanton					
	botor 2 Dawn	Marie Clanton					
Uni	ted States Bankruptcy Court	for the: NORTHERN DISTR	RICT OF ILLINOIS				
_	se number 		_			d filing ant showing postpetition as of the following date	
0	fficial Form 106l				MM / DD/ Y	YYY	
S	chedule I: Your	Income					12/15
spo atta Par	use. If you are separated a ch a separate sheet to this	. If you are married and not f nd your spouse is not filing form. On the top of any add yment	with you, do not inclu	ide informatio	n about your spo	use. If more space is	needed,
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing spouse	
	If you have more than one attach a separate page wit information about additional	h Employment status	☐ Employed Not employed		■ Emplo		
	employers.	Occupation			Substitu	ute Teacher	
	Include part-time, seasona self-employed work.	Include part-time, seasonal, or self-employed work. Employer's name			CUSD 3	03	
	Occupation may include st or homemaker, if it applies				201 S 7	th St. rles, IL 60174	
		How long employed th				Years, 0 Months	
Par	Give Details Abo	out Monthly Income					
	mate monthly income as o use unless you are separated	f the date you file this form. d.	If you have nothing to r	eport for any li	ne, write \$0 in the	space. Include your no	n-filing
	u or your non-filing spouse he space, attach a separate s	nave more than one employer, heet to this form.	combine the informatio	on for all emplo	yers for that perso	n on the lines below. If	you need
					For Debtor 1	For Debtor 2 or non-filing spouse	
2.		s, salary, and commissions onthly, calculate what the mon		2. \$_	0.00	\$ 374.00	-
3.	Estimate and list monthly	y overtime pay.		3. +\$_	0.00	+\$0.00	-
1	Calculate gross Income	Add line 2 + line 3		4 6	0.00	\$ 374.00	

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Debi	tor 1 tor 2	Derrick Lance Clanton Dawn Marie Clanton		C	Case nu	mber (if kı	nown)				
					For Do	ebtor 1			r Debtor n-filing		
	Cop	y line 4 here	4.		\$	(0.00	\$		374.00)
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	(0.00	\$		12.34	ı
	5b.	Mandatory contributions for retirement plans	5b.		\$		0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.		\$	(0.00	\$		0.00	
	5d.	Required repayments of retirement fund loans	5d.		\$	(0.00	\$		0.00)
	5e.	Insurance	5e.		\$	(0.00	\$		0.00)
	5f.	Domestic support obligations	5f.		\$		0.00	\$_		0.00	_
	5g.	Union dues	5g.		\$		0.00	\$_		0.00	
	5h.	Other deductions. Specify: THIS	_ 5h.	.+	\$		0.00	_		4.34	_
		TRS	_		\$		0.00	\$_		5.70	_
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	(0.00	\$_		22.38	<u>3</u> _
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	(0.00	\$_		351.62	<u>2</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-		c			Ф		0.00	
	8b.	monthly net income. Interest and dividends	8a. 8b.		\$		0.00	\$_ \$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$		0.00	\$ \$		0.00	
	8d.	Unemployment compensation	8d.		\$		0.00	\$		0.00	
	8e.	Social Security	8e.		\$		0.00	\$		0.00	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.		\$ \$		0.00 0.00	\$_ \$_		0.00	_
	8h.	Other monthly income. Specify:	_ 8h.	.+	\$	(0.00	+ \$ _		0.00)
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	(0.00	\$_		0.0	00
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		0.00	+ \$		351.62	= \$	351.62
11.	Incluothe Do r	te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe					•	Schedul	/e J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							э. 12.	\$	351.62
13.	Do :	you expect an increase or decrease within the year after you file this form	?							Combi	ined Ily income
		No. Yes. Explain:									

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Fill	in this informa	ition to identify yo	onic case.						
	otor 1			_		Ck	ماده	if this is:	
Deb	nor i	Derrick Land	e Clanto	n				if this is: n amended filing	
	otor 2	Dawn Marie	Clanton						wing postpetition chapter
(Spo	ouse, if filing)						1.	3 expenses as of	the following date:
Unit	ed States Bankr	ruptcy Court for the	NORTH	IERN DISTRICT OF ILLIN	IOIS		M	M / DD / YYYY	
1	e number nown)								
Of	fficial Fo	rm 106J							
So	chedule	J: Your l	Exper	ses					12/ ⁻
Be info nur	as complete ormation. If mathematic moder (if know	and accurate as lore space is ne n). Answer ever	possible eded, atta y questio	. If two married people a ch another sheet to this	re filing together, bo form. On the top of	oth are ed any add	qual	ly responsible fo al pages, write y	or supplying correct your name and case
Par 1.	t 1: Descr Is this a joir	ribe Your House	hold						
•	□ No. Go to								
	Yes. Doe	s Debtor 2 live i	in a separ	ate household?					
	■ N □ Y	-	st file Offici	al Form 106J-2, <i>Expense</i> :	s for Separate House	ehold of D	ebto	r 2.	
2.	Do you have	e dependents?	□ No						
	Do not list D Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not state dependents				Son			1 yrs	□ No ■ Yes
					Son			3 yrs	□ No ■ Yes
								 	■ Yes □ No
									☐ Yes
									□ No
3.	Do your exp	enses include	_	No					☐ Yes
	•	f people other the dyour depende	han □	Yes					
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a sup					
the		h assistance an		government assistance cluded it on <i>Schedule I:</i>				Your exp	enses
4.		or home owners		ses for your residence. r lot.	Include first mortgage	e 4.	\$		500.00
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
		rty, homeowner's	s, or renter	's insurance		4b.			0.00
				ipkeep expenses		4c.			0.00
5.		owner's associat		dominium dues our residence, such as ho	nme equity loans	4d. 5	\$ \$		0.00 0.00
Ο.	, additional i	igage payint	ioi y	on recidence, such as he	mic equity leans	J.	Ψ		0.00

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Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance specify: 15c. Vehicle insurance. 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18d. Vour payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21. Other: Specify: Pet Care	12. \$	250.00 110.00 60.00 0.00 300.00 165.00 40.00 300.00 0.00 0.00 0.00 0.00 0.0
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Traxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18d. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21. Other: Specify: Pet Care	6b. \$	110.00 60.00 0.00 300.00 165.00 40.00 50.00 0.00 0.00 0.00 0.00 110.00 0.00
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Traxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18d. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21. Other: Specify: Pet Care	6b. \$	110.00 60.00 0.00 300.00 165.00 40.00 50.00 0.00 0.00 0.00 0.00 110.00 0.00
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments you make to support others who do not live with you. Specify: 17d. Other payments you make to support others who do not live with you. Specify: 17d. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21d. Other: Specify: 22d. Calculate your monthly expenses	6b. \$	110.00 60.00 0.00 300.00 165.00 40.00 50.00 0.00 0.00 0.00 0.00 110.00 0.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1, 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21. Other: Specify: Pet Care	6c. \$	60.00 0.00 300.00 165.00 40.00 50.00 0.00 300.00 0.00 0.00 0.00 110.00 0.00
6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I, 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Challet Specify: Pet Care Calculate your monthly expenses	7. \$	0.00 300.00 165.00 40.00 50.00 0.00 300.00 0.00 0.00 0.00 110.00 0.00
Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I, 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Challet Specify: Pet Care Calculate your monthly expenses	8. \$	300.00 165.00 40.00 50.00 0.00 300.00 0.00 0.00 0.00 110.00
Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21d. Other: Specify: 22 Pet Care 23d. Calculate your monthly expenses	9. \$	165.00 40.00 50.00 0.00 300.00 0.00 0.00 0.00 110.00 0.00
Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21d. Other: Specify: 22d. Calculate your monthly expenses	10. \$	40.00 50.00 0.00 300.00 0.00 0.00 0.00 110.00 0.00
Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21d. Other: Specify: 22d. Calculate your monthly expenses	11. \$	50.00 0.00 300.00 0.00 0.00 0.00 110.00 0.00
Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18d. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1, 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21d. Other: Specify: 22d. Calculate your monthly expenses	12. \$	0.00 300.00 0.00 0.00 0.00 110.00 0.00
2. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 3. Entertainment, clubs, recreation, newspapers, magazines, and books 4. Charitable contributions and religious donations 5. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. 15d. Other insurance. 15d. Other insurance specify: 15d. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. 19. Other payments you make to support others who do not live with you. 19. Other payments you make to support others who do not live with you. 19. Other payments you make to support others who do not live with you. 19. Other payments you make to support others who do not live with you. 19. Other payments you make to support others who do not live with you. 19. Other payments you make to support others who do not live with you. 19. Other payments you make to support others who do not live with you. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21. Other: Specify: 22. Pet Care 23. Calculate your monthly expenses	12. \$	300.00 0.00 0.00 0.00 0.00 110.00 0.00
Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 1 15b. Health insurance 1 15c. Vehicle insurance 1 15d. Other insurance. Specify: 1 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 1 17a. Car payments for Vehicle 1 1 17b. Car payments for Vehicle 2 1 17c. Other. Specify: 1 17d. Other. Specify: 1 17d. Other. Specify: 1 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: 1 Other real property expenses not included in lines 4 or 5 of this form or on Schedule 20a. Mortgages on other property 20b. Real estate taxes 22c. Property, homeowner's, or renter's insurance 22d. Maintenance, repair, and upkeep expenses 22c. Homeowner's association or condominium dues 22c. Calculate your monthly expenses	13. \$	0.00 0.00 0.00 0.00 110.00 0.00
Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15pecify: 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15pecify: 15d. Car payments for Vehicle 1 15d. Car payments for Vehicle 2 15d. Other. Specify: 15d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 15d. Other payments you make to support others who do not live with you. 15d. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20d. Calculate your monthly expenses	14. \$	0.00 0.00 0.00 110.00 0.00
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Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15a. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15b. Health insurance 15c. Vehicle insurance. Specify: 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 18 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18 Your payments you make to support others who do not live with you. Specify: 19 Other payments you make to support others who do not live with you. Specify: 20 Other real property expenses not included in lines 4 or 5 of this form or on Schedule I 20a. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21 Other: Specify: Pet Care 22 Calculate your monthly expenses	15b. \$	0.00 110.00 0.00
15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 7. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 7. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l). 9. Other payments you make to support others who do not live with you. Specify: 10. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Other: Specify: Pet Care 2. Calculate your monthly expenses	15b. \$	0.00 110.00 0.00
15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 7. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 7. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 9. Other payments you make to support others who do not live with you. 18. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20d. Calculate your monthly expenses	15b. \$	0.00 110.00 0.00
15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15e. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21. Other: Specify: 22. Calculate your monthly expenses	15c. \$ 15d. \$ 16. \$ 17a. \$	110.00 0.00
15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1, 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21. Other: Specify: Pet Care 22. Calculate your monthly expenses	15d. \$ 16. \$ 17a. \$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I, 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 21. Other: Specify: Pet Care Calculate your monthly expenses	16. \$	
Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 10. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I, 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20d. Other: Specify: 21 Pet Care 22 Calculate your monthly expenses		0.00
Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I, 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20d. Other: Specify: Pet Care Calculate your monthly expenses		0.00
17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Other payments you make to support others who do not live with you. 19. Other payments you make to support others who do not live with you. 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20f. Other: Specify: 20 Calculate your monthly expenses	· —	
17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I, 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20d. Other: Specify: 21 Pet Care 22 Calculate your monthly expenses	· —	
17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Other payments you make to support others who do not live with you. 19. Other payments you make to support others who do not live with you. 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 120a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20d. Other: Specify: 21 Pet Care 22 Calculate your monthly expenses		297.00
17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 10. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20fther: Specify: 20 Calculate your monthly expenses	17b. \$	0.00
Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Other: Specify: Pet Care Calculate your monthly expenses	17c. \$	0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20d. Other: Specify: Pet Care Calculate your monthly expenses	17d. \$	0.00
Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20d. Other: Specify: Pet Care Calculate your monthly expenses	18. \$	0.00
Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20d. Other: Specify: Pet Care Calculate your monthly expenses	\$	
Other real property expenses not included in lines 4 or 5 of this form or on Schedule 20a. Mortgages on other property 22bb. Real estate taxes 22cc. Property, homeowner's, or renter's insurance 22dd. Maintenance, repair, and upkeep expenses 22ce. Homeowner's association or condominium dues 22dd. Other: Specify: Pet Care Calculate your monthly expenses	υ ^Ψ —	0.00
20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20d. Other: Specify: Pet Care 21c. Calculate your monthly expenses	-	ome
20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20d. Other: Specify: Pet Care 20d. Calculate your monthly expenses	20a. \$	0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20d. Other: Specify: Pet Care 20d. Calculate your monthly expenses	20b. \$	0.00
20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20d. Other: Specify: Pet Care 20d. Calculate your monthly expenses	20c. \$	0.00
20e. Homeowner's association or condominium dues 2 Other: Specify: Pet Care 2 Calculate your monthly expenses	20d. \$ —	0.00
Other: Specify: Pet Care Calculate your monthly expenses	20e. \$	0.00
2. Calculate your monthly expenses	21. +\$	
	Ζ1. +φ	50.00
22a. Add lines 4 through 21.	\$	2,232.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	2,232.00
, , ,		_,
3. Calculate your monthly net income.		
, ,	23a. \$	351.62
23b. Copy your monthly expenses from line 22c above.	23b\$	2,232.00
23c. Subtract your monthly expenses from your monthly income.		
The result is your <i>monthly net income</i> .	23c. \$	-1,880.38
	age payment	t to increase or decrease because of a
 Do you expect an increase or decrease in your expenses within the year after you file For example, do you expect to finish paying for your car loan within the year or do you expect your mortgamodification to the terms of your mortgage? No. Yes. 		

Fill in this infor	mation to identify your coop		
	mation to identify your case:		
Debtor 1	Derrick Lance Clanton First Name Middle N	lame Last Name	-
Debtor 2	Dawn Marie Clanton	vanie Last ivanie	
(Spouse if, filing)	First Name Middle N	lame Last Name	-
United States Ba	ankruptcy Court for the: NORTHERI	N DISTRICT OF ILLINOIS	_
Case number			
(if known)		_	☐ Check if this is an amended filing
Official Form		vidual Debtor's Schedules	12/15
ears, or both. 1	y or property by fraud in connection 8 U.S.C. §§ 152, 1341, 1519, and 357 n Below	with a bankruptcy case can result in fines up to \$2'1.	50,000, or imprisonment for up to 20
Did you pa	y or agree to pay someone who is N	IOT an attorney to help you fill out bankruptcy form	s?
■ No			
☐ Yes. I	Name of person		Bankruptcy Petition Preparer's Notice, ration, and Signature (Official Form 119)
	alty of perjury, I declare that I have re e true and correct.	ead the summary and schedules filed with this decl	aration and
X /e/ Dor	rick Lance Clanton	X /s/ Dawn Marie Clanton	
	k Lance Clanton	Dawn Marie Clanton	
	re of Debtor 1	Signature of Debtor 2	
Date	February 23, 2016	Date February 23 2016	

HI	l in this inform	nation to identify you	r casa:								
	btor 1	Derrick Lance C									
		First Name	Middle Name	Last Name							
	btor 2 ouse if, filing)	Dawn Marie Clar	nton Middle Name	Last Name							
			NORTHERN DISTRICT (
Un	ileu States Dai	nkruptcy Court for the:	NORTHERN DISTRICT C	JF ILLINOIS							
	se number				-	theck if this is an mended filing					
St		of Financial	Affairs for Individ			12/1					
info nun Pa	ormation. If member (if known	ore space is needed, n). Answer every ques petails About Your Ma	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write you						
1.	What is you	r current marital statu	is?								
	Married										
	☐ Not mar	rried									
2.	During the la	uring the last 3 years, have you lived anywhere other than where you live now?									
	□ No										
	Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	I.						
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there					
	230 S. For Batavia IL	est Ave. 60510-000	From-To: 03/01/2013 - 07/01/2013	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:					
	No Yes. Ma	tes include Arizona, Ca take sure you fill out <i>Scl</i> n the Sources of You	lifornia, Idaho, Louisiana, Ne nedule H: Your Codebtors (O	vada, New Mexico, Puerto R	ity property state or territory ico, Texas, Washington and W	(isconsin.)					
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?					
	□ No ■ Yes. Fill	in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$459.00					
			☐ Operating a business		☐ Operating a business						

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Debto		awn Marie Cla				Case	number (if known)		
			Debto	∆r 4			Debtor 2		
			Source	ces of income call that apply.	Gross income (before deductions exclusions)	s and	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		ndar year: December 31, 2		ages, commissions, ses, tips	\$5,40	00.00	■ Wages, combonuses, tips	imissions,	\$3,249.98
			Ор	perating a business			☐ Operating a	business	
		dar year before December 31, 2		ages, commissions, ses, tips	\$1,50	00.00	■ Wages, combonuses, tips	imissions,	\$3,849.00
			■ Op	perating a business			☐ Operating a	business	
	st each		ross income fron	ou have income that y	_				
			Debto				Debtor 2		
				tes of income tibe below	Gross income (before deductions exclusions)	and	Sources of inc Describe below		Gross income (before deductions and exclusions)
Part 3	Lis	t Certain Payme	nts You Made E	Before You Filed for	Bankruptcy				
i. A □] No.	Neither Debto individual prima During the 90 c □ No. Go □ Yes Lis pa no * Subject to ac Debtor 1 or De	r 1 nor Debtor 2 arily for a person lays before you f to line 7. t below each cre d that creditor. D t include paymer ljustment on 4/0	s primarily consume thas primarily consumerations and the primarily or househout filed for bankruptcy, distributed for bankruptcy, distributed for the payments to an attorney for the standard every 3 years thave primarily consumpted for bankruptcy, distributed for bankruptcy, dis	Imer debts. Consumer debts. Consumer debts." d you pay any creditor d a total of \$6,225* or ats for domestic supports bankruptcy case. Is after that for cases fumer debts.	r a total r more in ort obliga	of \$6,225* or mo one or more pay ations, such as ch or after the date o	re? vments and t illd support a f adjustment	ind alimony. Also, do
		■ Yes Lis							t creditor. Do not include payments to an
(Creditor	's Name and Ad	dress	Dates of payme		unt paid	Amount you still owe	Was this p	payment for
2		Monroe St., #1 o, IL 60606	25	02/2016; 01/20 12/2015	016; \$623	.80	\$9,696.04	☐ Mortga	Card

 \square Suppliers or vendors

☐ Other

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Debtor 2 **Dawn Marie Clanton** Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider **Insider's Name and Address** Amount you Reason for this payment Dates of payment **Total amount** still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Discover Bank v. Derrick Clanton & Collection 16th Judicial District - Kane Pending **Dawn Hummel** Co. □ On appeal 15-SC-3693 100 S. 3rd Street ☐ Concluded Geneva, IL 60134 **Judgment** Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. Nο Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes

Derrick Lance Clanton

Debtor 1

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	otor 1 otor 2	Derrick Lance Clanton Dawn Marie Clanton			Case num	nber (if known)	
Par	t 5:	List Certain Gifts and Contribution	s				
13.	■ ¹	n 2 years before you filed for bankr No Yes. Fill in the details for each gift.			s with a total value of mo		
	per p	s with a total value of more than \$60 person on to Whom You Gave the Gift and ress:	0	Describe the gifts		Dates you gave the gifts	Value
14.	= 1	n 2 years before you filed for bankr No Yes. Fill in the details for each gift or c			s or contributions with a	total value of more than	\$600 to any charity
	more Char	s or contributions to charities that to than \$600 rity's Name ress (Number, Street, City, State and ZIP Code		Describe what you	ı contributed	Dates you contributed	Value
Par	t 6:	List Certain Losses					
15.	or ga	n 1 year before you filed for bankru mbling? No Yes. Fill in the details.	ptcy or	since you filed for b	ankruptcy, did you lose	anything because of thef	t, fire, other disaster,
	Desc	cribe the property you lost and the loss occurred	Include		verage for the loss rance has paid. List pendion of Schedule A/B: Property.		Value of property lost
Par	t 7:	List Certain Payments or Transfers	5				
16.	Includ	n 1 year before you filed for bankru ulted about seeking bankruptcy or place any attorneys, bankruptcy petition provided. No Yes. Fill in the details.	preparii	ng a bankruptcy peti	tion?		rty to anyone you
	Addı Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not Y	′ou	Description and va transferred	alue of any property	Date payment or transfer was made	Amount of payment
	111	ndel & Jansons Law Group Flinn St. avia, IL 60510		Legal services for	ees	09/02/2015	\$1,129.00
17.	prom Do no	n 1 year before you filed for bankru ised to help you deal with your cred of include any payment or transfer that	ditors o	or to make payments		ay or transfer any prope	rty to anyone who
	_	No Yes. Fill in the details.					
	Pers Addi	on Who Was Paid ress		Description and vatransferred	alue of any property	Date payment or transfer was made	Amount of payment

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Debtor 1 Debtor 2 Derrick Lance Clanton
Debtor 2 Dawn Marie Clanton

Case number (if known)

18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No	ousiness or financial affa ade as security (such as t	iirs? he granting of a s						
	☐ Yes. Fill in the details.								
	Person Who Received Transfer Address	Description and v property transferr		payme	be any property or ents received or debts n exchange	Date transfer made	r was		
	Person's relationship to you				-				
9.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		y property to a s	self-settled	d trust or similar device o	of which you a	re a		
	Yes. Fill in the details.								
	Name of trust Description and value of the property transferred						r was		
						made			
Pai	t 8: List of Certain Financial Accounts, In	struments, Safe Deposit	Boxes, and Sto	rage Units	S				
20	Within 1 year before you filed for hankrunte	v word any financial ac	counts or instru	monts hol	ld in your name, or for yo	ur bonofit elo	eod		
	Within 1 year before you filed for bankrupto sold, moved, or transferred?					•			
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.								
	No								
	Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accour instrument	nt or	Date account was closed, sold, moved, or transferred	Last ba before clos tra			
21.	Do you now have, or did you have within 1	year before you filed for	bankruptcy, any	y safe dep	osit box or other deposi	tory for securi	ties,		
	cash, or other valuables?								
	■ No								
	Yes. Fill in the details.								
	Name of Financial Institution	Who else had acc		Describe t	the contents	Do you sti	II		
	Address (Number, Street, City, State and ZIP Code)	Address (Number, State and ZIP Code)	treet, City,			have it?			
22.	Have you stored property in a storage unit	or place other than your	home within 1 y	ear befor	e you filed for bankruptc	y			
	■ No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it?	nad access	Describe t	the contents	Do you sti have it?	II		
		Address (Number, State and ZIP Code)	treet, City,						
Pai	t 9: Identify Property You Hold or Control	for Someone Else							
2	Do you hold or control any property that so	maana alsa awns? Incli	ido any proporty	, vou borr	awad from are storing fo	or or hold in t	ruet		
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in t for someone.						ıusı			
	No								
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	the property		Value		
Pai	t 10: Give Details About Environmental Inf	ormation							
or	the purpose of Part 10, the following definiti	ons apply:							
		· · ·							

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Derrick Lance Clanton Debtor 1 **Dawn Marie Clanton** Debtor 2

Case number (if known)

Dates business existed

From-To 02/2014-12/2014

EIN:

		c substances, wastes, or material into tule and the substances, wastes, or material into the substance in			ıwaı	er, or other mealum, including s	latutes or					
		means any location, facility, or propertion, operate, or utilize it, including disp	-		aw,	whether you now own, operate,	or utilize it or used					
		<i>tardous material</i> means anything an env ardous material, pollutant, contaminant			wa	ste, hazardous substance, toxic	substance,					
Rep	ort a	II notices, releases, and proceedings th	at yo	ou know about, regardless of when	the	ey occurred.						
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?											
	_	Ma										
		No Yes. Fill in the details.										
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	ı	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any release of hazardous material?											
		No										
	Yes. Fill in the details.											
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	ı	Environmental law, if you know it	Date of notice					
26	Hav	re you been a party in any judicial or ad	minis	strative proceeding under any envi	roni	mental law? Include settlements	and orders					
_0.	_											
		No Yes. Fill in the details.										
		se Title		Court or agency	Na	ture of the case	Status of the					
		se Number		Name Address (Number, Street, City, State and ZIP Code)	IVa	ture of the case	case					
Par	t 11:	Give Details About Your Business or	Con	nections to Any Business								
27	Witl	— hin 4 years hefore you filed for hankrun	tcv (did you own a husiness or have an	v of	the following connections to an	v husiness?					
21.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time											
		_				-						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)											
	☐ A partner in a partnership											
	☐ An officer, director, or managing executive of a corporation											
	_	☐ An owner of at least 5% of the votir	•									
	No. None of the above applies. Go to Part 12.											
		Yes. Check all that apply above and fil	l in t	he details below for each business	-							
		siness Name dress	De	scribe the nature of the business		Employer Identification number Do not include Social Security						
		mber, Street, City, State and ZIP Code)	Na	me of accountant or bookkeeper		20 not morado occidi occurry						

Name of accountant or bookkeeper

Sports Training

Victory Basketball Academy, Inc.

1003 S. Harrison St.

Batavia, IL 60510

Case 16-05869 Doc 1 Filed 02/23/16 Entered 02/23/16 12:42:57 Desc Main Page 48 of 60 Document **Derrick Lance Clanton** Debtor 1 Debtor 2 **Dawn Marie Clanton** Case number (if known) Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☐ Yes. Fill in the details below. **Date Issued** Name (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Dawn Marie Clanton /s/ Derrick Lance Clanton Dawn Marie Clanton **Derrick Lance Clanton** Signature of Debtor 1 Signature of Debtor 2 Date February 23, 2016 Date February 23, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your ca	ase:		
Debtor 1	Derrick Lance Clar	nton		
Dobtor :	First Name	Middle Name	Last Name	
Debtor 2	Dawn Marie Clanto	n		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official For Statemen		n for Indiv	iduals Filing Under Chapte	er 7 12/15
	vidual filing under chapt claims secured by you		out this form if:	
_	ed personal property an		at expired	
You must file this	form with the court wit ver is earlier, unless the	hin 30 days after y	you file your bankruptcy petition or by the date set it ime for cause. You must also send copies to the	
	ople are filing together i d date the form.	n a joint case, bot	h are equally responsible for supplying correct ir	nformation. Both debtors must
	nd accurate as possible our name and case num		needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	Secured Claims		
1. For any credito information bel		t 1 of Schedule D:	Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
Identify the cre	ditor and the property tha	at is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Ch	nase Auto Finance		☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	
	2012 Dodge Journe	y 50,000	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:	miles Good condition		Retain the property and [explain]: Pay according to the original agreement	
For any unexpired in the information	below. Do not list real	se that you listed i estate leases. Une	n Schedule G: Executory Contracts and Unexpire expired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(e lease period has not yet ended.
Describe your ur	nexpired personal prope	erty leases		Will the lease be assumed?
-		_		
Lessor's name:				□ No
Description of lease Property:	sea			П Усе
-17.				☐ Yes
Lessor's name:				□ No
Description of lease Property:	sed			□ V
i Topolty.				☐ Yes
Lessor's name:				

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

page 1

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	otor 1 otor 2	Derrick Lance Clanton Dawn Marie Clanton	Case number (if known)
	scriptior perty:	n of leased	□ No
Des	ssor's na scriptior perty:	ame: n of leased	□ No
Des	ssor's na scriptior perty:	ame: n of leased	□ No □ Yes
Des	ssor's na scriptior perty:	ame: n of leased	□ No
Des	sor's na scriptior perty:	ame: n of leased	□ No □ Yes
Und	er pena	Sign Below alty of perjury, I declare that I have indicate at its subject to an unexpired lease. errick Lance Clanton	my intention about any property of my estate that secures a debt and any personal X /s/ Dawn Marie Clanton
^	Derr	ck Lance Clanton ture of Debtor 1	Dawn Marie Clanton Signature of Debtor 2
	Date	February 23, 2016	Date February 23, 2016

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-05869 Doc 1 Filed 02/23/16 Entered 02/23/16 12:42:57 Desc Main Document Page 55 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In	Derrick Lance Clanton Te Dawn Marie Clanton		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSA			, ,	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	the petition in bankruptcy,	or agreed to be paid	to me, for services rendere	ed or to
				1,129.00	
	Prior to the filing of this statement I have received		\$	1,129.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compensa	tion with any other person	unless they are mem	bers and associates of my	law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of				rm. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statemer c. Representation of the debtor at the meeting of creditors and d. [Other provisions as needed] Exemption planning. 	nt of affairs and plan which	may be required;		y;
б.	By agreement with the debtor(s), the above-disclosed fee doe Representation of the debtors in any discha any other adversary proceeding: negotiation filing of reaffirmation agreements and applie USC 522(f)(2)(A) for avoidance of liens on he	rgeability actions, judins with secured credito cations as needed; pre	cial lien avoidanc ors to reduce to m	arket value; preparation	on and
	C	ERTIFICATION			
this	I certify that the foregoing is a complete statement of any agree bankruptcy proceeding.	reement or arrangement for	payment to me for re	epresentation of the debtor	r(s) in
	February 23, 2016	/s/ Lawrence W. I	_obb		
Date		Lawrence W. Lob			
		Signature of Attorne Drendel & Janson			
		111 Flinn St.	-		
		Batavia, IL 60510 630-406-5440 Fa			
		lwl@batavialaw.c			
		Name of law firm			

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United States Bankruptcy Court Northern District of Illinois

In re	Dawn Marie Clanton		Case No.		
		Debtor(s)	Chapter	7	
	V	ERIFICATION OF CREDITOR M	IATRIX		
		Number of	Creditors:	42	
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credit	tors is true and	correct to the best of my	
Date:	February 23, 2016	/s/ Derrick Lance Clanton Derrick Lance Clanton			
		Signature of Debtor			
Date:	February 23, 2016	/s/ Dawn Marie Clanton			
		Dawn Marie Clanton	Dawn Marie Clanton		
		Signature of Debtor			

AES/Brazos P.O. Box 61047 Harrisburg, PA 17106

Afni, Inc. P.O. Box 3097 Bloomington, IL 61702

American Express P.O. Box 3001 16 General Warren Blvd. Malvern, PA 19355

Arnold Scott Harris, P.C. 111 West Jackson Blvd. Suite 600 Chicago, IL 60604

Blitt and Gaines, P.C. 661 Glenn Avenue Wheeling, IL 60090

C.U. Recovery 26263 Forest Blvd. Wyoming, MN 55092

Capital One Bank Attn: Bankruptcy Dept. P.O. Box 30285 Salt Lake City, UT 84130

Central Credit Services, LLC P.O. Box 1850 Saint Charles, MO 63302

Chase Auto Finance Attn: National Bankruptcy Dept P.O. Box 29505 Phoenix, AZ 85038

Chase Card Services Po Box 15298 Wilmington, DE 19850-5298 Client Services, Inc. 3451 Harry Truman Blvd. Saint Charles, MO 63301-4047

Comenity Bank Attention: Bankruptcy Dept. P.O. Box 182686 Columbus, OH 43218

Credit Collection Services Two Wells Avenue Newton Center, MA 02459

David and Patricia Hummel 230 S Forest Ave. Batavia, IL 60510

Discover Financial Services, LLC P.O. Box 15316 Wilmington, DE 19850

Diversified Services Group 1824 West Grand Ave. Suite 200 Chicago, IL 60622

Enterprise Recovery Systems, Inc. 840 S. Frontage Rd. Woodridge, IL 60517

First Premier Bank 601 S. Minnesota Ave Sioux Falls, SD 57104

GC Services Limited Partnerhip 6330 Gulfton Houston, TX 77081

Great Lakes Credit Union P.O. Box 1289 Bannockburn, IL 60015

Great Lakes Ed. Student Loans, Inc. P.O. Box 7860 Madison, WI 53707

Healthcare Associates Credit Union 1151 E Warrenville Rd. Naperville, IL 60563

IC System
Attn: Bankruptcy Dept.
444 Highway 96 East; P.O Box 64378
St. Paul, MN 55164

Illinois Tollway Authority 2700 Ogden Ave Downers Grove, IL 60515

Internal Revenue Service 31 Hopkins Plaza Baltimore, MD 21201

Kohl's N56 W 17000 Ridgewood Dr. Menomonee Falls, WI 53051

LTD Financial Services 7322 Southwest Freeway Suite 1600 Houston, TX 77074

Macy's Dept Store National Bank Bankruptcy Processing P.O. Box 8218 Mason, OH 45040

Merchants' Credit Guide Co. 223 W Jackson Blvd. Suite 400 Chicago, IL 60606

Midland Funding, LLC 8875 Aero Dr. Suite 200 San Diego, CA 92123

MRS Associates of New Jersey 1930 Olney Ave. Cherry Hill, NJ 08003 NES of Ohio 29125 Solon Road Solon, OH 44139-3442

Northland Group P.O. Box 129 Thorofare, NJ 08086-0129

Northland Group, Inc. P.O. Box 390905 Minneapolis, MN 55439

Northstar Location Services, LLC 4285 Genesee Street Cheeklowaga, NY 14225-1943

PNC Bank
P. O. Box 747066
Pittsburgh, PA 15274

Portfolio Recovery Associates, Inc. 287 Independence Virginia Beach, VA 23462

Professional Placement Services P.O. Box 612 Milwaukee, WI 53201-0621

Sunrise Credit Services, Inc. P.O. Box 9100 Farmingdale, NY 11735-8534

Toyota Motor Credit Co. Toyota Financial Services P.O. Box 8026 Cedar Rapids, IA 52408

U.S. Dept Of Education P.O. Box 4222 Iowa City, IA 52244

Unique National Collections 119 E. Maple St. Jeffersonville, IN 47130